# Application Data Sheet Under 37 C.F.R. § 1.76

## **Application Information**

Application number::	
Filing Date::	
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title ::	SYSTEM AND METHOD FOR USING A SPLIT- DIRECTORY STRUCTURE FOR SOFTWARE DEVELOPMENT
Attorney Docket Number::	BEAS-01433US1
Request for Early Publication?::	
Request for Non-Publication?::	
Suggested Drawing Figure::	2
Total Drawing Sheets::	1
Small Entity?::	
Latin name::	
Variety denomination name::	
Petition included?::	
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	

# **Applicant Information**

**Applicant Authority Type::** 

• • • • • • • • • • • • • • • • • • • •	
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Rob
Middle Name::	
Family Name::	Woollen
Name Suffix::	
City of Residence::	San Francisco
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	235 Montgomery Street
City of mailing address::	San Francisco
State or Province of mailing address::	CA
Country of mailing address::	US
Postal or Zip Code of mailing address::	94104
Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
	•
Given Name::	Mark
Middle Name::	
Family Name::	Griffith
Name Suffix::	
City of Residence::	Pleasant Hill
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	235 Montgomery Street

Inventor

City of mailing address::

San Francisco

State or Province of mailing address::

CA

Country of mailing address::

US

Postal or Zip Code of mailing address::

94104

#### **Correspondence Information**

**Correspondence Customer Number ::** 

23910

Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Phone number::

415-362-3800

Fax Number:

415-362-2928

E-Mail address::

kfk@fdml.com, srm@fdml.com

#### **Representative Information**

Representative Customer	23910		
Number::	23910	 	

#### **Domestic Priority Information**

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	An application claiming the benefit under 35 U.S.C. 119(e)	60/450,781	February 28, 2003

## **Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::
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### **Assignee Information**

Assignee name:: BEA SYSTEMS, INC.

Street of mailing address:: 2315 North First Street

City of mailing address:: San Jose

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 95131